

DELAWARE DEPARTMENT OF AGRICULTURE PLANT INDUSTRIES SECTION 2320 S. DUPONT HIGHWAY DOVER, DELAWARE 19901-5515

Phone: (302) 698-4577 (800) 282-8685

GRAIN INSPECTORS -- RENEWAL APPLICATION

Applicant:					
Address:					
City/State/Zip					
Business:					
Address:					
City/State/Zip					
CURRENT LICEN	ISE NO.		Expiring:		
GRAIN INSPECTED: (Check Box)					
CO	RN:	SOYBEANS:			
BARLEY: \Box WHEAT:					
SORGH	UM:	OTHER:			
MOISTURE DEVICE: (Check Box)					
MOTOMCO: \Box GAC 2000: \Box					
GAC 2100: \Box GAC 2100b: \Box					
STINELI		_			
TRAINING: List all you have completed.					
Other license:					
Weighmasters No.: Expiration date:					
Warehouse lice			Expiration date:		
		company application	for grain inspectors.	All license must be	returned to the
Delaware Department of Agriculture within 30 days of termination of employment.					
I agree to comply with all the requirements of the Grain Inspection Rules and Regulations.					
			Signa	ature of Applicant	Date
PAYMENT: CHECK: Amount Let CHECK NO: CHECK NO: Please Make Check Payable To: Delaware Department of Agriculture Seed Laboratory					
•		S □ VIS			OVER/NOVUS
Card Number: Exp Date: 3-Digit Code:					
Billing Name: Telephone No:					
Billing Address: _		City	/State/Zip:		
Authorization Signature: Date:					
OFFICE USE ONLY					
PAYMENT	CASH	CHECK NO	CREDIT	INVOICE NO	POSTED
			******	CTORGRE ADDITIONT	N 00 02 20 D CD W